

Twenty-fourth
ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1922.



GUERNSEY :

THE GUERNSEY "STAR" AND "GAZETTE" COMPANY, LTD.
7 BRIDGE STREET

1923.

APPENDICE.

RAPPORT DE L'OFFICIER DE LA SANTÉ PUBLIQUE, 1922.

RAPPORT DE MONSIEUR L'OFFICIER DE LA SANTÉ PUBLIQUE, 1922.

States Office, Guernsey, October 27th, 1923.

SIR,

I have the honour to forward herewith the Annual Report of the Medical Officer of Health for the year 1922, with the request that it may be printed as an Appendix to a Billet d'Etat, and that a number of copies (say 100), be struck off for distribution in the usual way.

I have the honour to be, Sir,

Your obedient Servant,

G. E. KINNERSLY,

President, States Sanitary Committee.

Sir Havilland de Sausmarez, Bailiff,
and President of the States of Guernsey.



GUERNSEY.

Guernsey, the most western of the Channel Islands, lies in the Bay of Avranches, 82 miles from Weymouth, the nearest English port, 40 from Cherbourg, and 63 from St. Malo.

It is triangular in shape, with an area of 24·5 square miles and an acreage of 15,654. The soil, composed of disintegrated granite and schist, is very fertile. Enormous quantities of tomatoes, grapes and other fruit, vegetables and flowers are grown, chiefly under glass, for export.

This industry is the chief one, but in addition, large quantities of granite for road-making are exported. The rearing, for sale in England and the United States, of the far-famed Guernsey cattle (including those from Alderney and Sark) is an important industry. These cattle are highly prized, not only for the richness of their milk, but above all for their freedom from Tuberculosis. There are two harbours, situated at St. Peter-Port and St. Sampson's, the two towns of the island.

The population at the census of 1911 was 41,854, and in 1921 it was stated to be 37,914 with 1,098 visitors.

Guernsey is a health resort throughout the year, but particularly so in the summer and autumn months. Not only are its natural beauties so great, but its salubrious yet bracing climate is highly attractive. It is cooler in summer and warmer in winter than on the mainland.

Drainage is good and modern in the towns. The water supply, now the property of the Government of the island, is of exceptional purity and derived from deep wells, but additional sources of supply are being sought.

Guernsey enjoys Home Rule. With Alderney and Sark it forms a Bailiwick and is governed by a Lieutenant-Governor. The Bailiff is the chief Civil Official.

1922—Population—Males	18,015
Females	20,185
	<hr/>
	38,200
	<hr/>

APPENDICE.

Houses—Inhabited	8,491	} 1921
Buildings—Uninhabited.....	682	
„ Constructing	19	
Density of Population per acre.....	2·4	
„ „ per square mile	1,559	
Average number of Inhabitants per house ..	4·4	
Birth rate per 1,000	21·2	
Death rate „	13·8	
„ corrected.....	12·7	
Infantile death rate.....	90	
Rainfall average	36·7 inches,	
„ „ 1921.....	17·7	„
„ „ 1922.....	36·2	„

(In parts of the Island the rainfall is only 80 per cent. of the average.)

Mean relative humidity	84
Mean average temperature.....	50·9
Mean daily range.....	9·9
*Average yearly hours of sunshine, 1903-1922	1,901
„ „ „ „ „ 1922	1,811

* Both are records for the British Isles.

EXPORTS.

	1921	1922
Tomatoes	20,723 tons.	17,827 tons.
Flowers	1,179 „	1,707 „
Grapes	1,737 „	2,080 „
Vegetables	4,476 „	1,355 „
Granite	225,110 „	196,570 „

TWENTY-FOURTH ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
For the year 1922.

POPULATION.

The population at the middle of the year was estimated at 38,200, of which males numbered 18,015 and females 20,185.

Table I.

YEAR.	Estimated population to middle of each year.	BIRTHS.		TOTAL DEATHS REGISTERED IN GUERNSEY.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO GUERNSEY.		
		Number.	Rate.	Number.	Rate.	Of non-residents Registered in the District.	Of residents not registered in the District.	UNDER 1 YEAR OF AGE.		At ALL AGES
								Number.	Rate per 1,000 Births	
1912.....	41,854	983	23.5					101	102.7	552
1913.....	41,854	887	21.2					101	113.8	550
1914.....	42,000	880	20.9					81	92.0	498
1915.....	41,000	784	19.1					113	144.0	609
1916.....	41,000	698	17.0					62	88.9	536
1917.....	39,000	694	17.7					57	82.0	554
1918.....	38,500	664	17.2					49	73.8	603
1919.....	39,600	659	16.6	578	14.6	9	—	64	98.6	569
1920.....	37,914	893	23.5	507	12.6	11	2	74	82.8	498
1921.....	37,914	768	20.0	502	13.2	7	—	60	78.0	495
Averages for ten years, 1911-1921.	40,063	791	19.6	—	—	—	—	76	95.4	546
1922.....	38,200	810	21.2	537	14.0	11	2	73	90	528
										13.8*

* Corrected 12.7.

Table II.

ENGLISH AND GUERNSEY STATISTICS.

			Birth Rate per 1,000.		Death Rate per 1,000.		Deaths under 1 year per 1,000.
England and Wales	....	....	20.6	....	12.9	....	77
96 Great towns, including London			21.5	....	13.0	....	81
148 Smaller towns	....	....	20.5	....	11.7	....	75
London	....	....	21.4	....	13.4	....	73
Guernsey	....	....	21.2	Crude	13.8	....	90
				Corrected	12.7	....
Jersey	....	....	17.5	....	15.7	....	77.9

BIRTHS.

The births numbered 810—males 416 and females 394—equal to a rate of 21.2 per 1,000. This is a little above the rate for the previous ten years—19.6; but 5.0 below that of the ten years 1902–1911.

Still births numbered 33, and illegitimate births 35, percentages of 4.0 and 4.3 respectively.

DEATHS.

There were 537 deaths registered during the year. Of these 11 were persons not domiciled here and 2 were those of residents who died out of Guernsey, thus bringing the statistical number to 528. This is equal to a crude death rate of 13.8 per 1,000 (corrected 12.7). The average of the preceding 10 years was 13.6, and for the ten years 1902–1911, 14.9. Perhaps the most striking difference from past years is in the increase of deaths due to bronchitis, viz. :—37 against the average of 24.

During the months May to October inclusive, 27 children under 1 year and 100 adults of 65 years and upwards died, whilst between November and April inclusive, 46 children and 136 adults of like ages died. In August only 21 deaths occurred, the rate being only 6.6 for the month.

As another year has passed without the figures necessary for the estimating of a “standardized” death rate being available, I feel that in justice to the community some correction factor must be applied in order that our death rates may fairly be contrasted with that of other places with different conditions. It will be readily understood that there are a larger number of persons of advanced age in Guernsey than in most places, and that therefore the death rate amongst them will naturally be higher than in a manufacturing town where people of younger years predominate. I have therefore until more exact information be forthcoming, applied a factor of .9250, by which the Guernsey death rate should be multiplied. By doing so the “corrected” death rate

becomes 12.7 instead of 13.8, and this figure is, I believe, still higher than it should really appear to be.

There were no uncertified deaths during the year.

PERCENTAGE OF DEATHS AT DIFFERENT AGE PERIODS.

	Under 1 year.	Years 1-5.	Years 5-15.	Years 15-25.	Under 25 years.	Years 25-65.	Over 65 years.
1900-1904 ..	24.0 ...	9.0 ...	4.0 ...	5.0 ...	42.0 ...	27.0 ...	30.0
1905-1909 ..	22.3 ...	8.0 ...	3.0 ...	4.6 ...	38.0 ...	28.0 ...	33.0
1910-1914 ..	20.2 ...	7.2 ...	3.3 ...	3.8 ...	34.5 ...	27.8 ...	37.7
1915-1919 ..	12.5 ...	5.1 ...	3.6 ...	4.9 ...	26.2 ...	33.1 ...	40.7
1920	12.5 ...	5.1 ...	3.6 ...	5.0 ...	26.1 ...	33.1 ...	40.7
1921	12.1 ...	2.6 ...	5.0 ...	6.2 ...	25.9 ...	30.5 ...	43.4
1922	13.8 ...	3.2 ...	4.1 ...	6.9 ...	28.0 ...	29.2 ...	42.8

Deaths in public institutions were as follows :—

Town Hospital	....	....	....	37
Town Asylum	....	....	....	3
Castel Hospital	....	....	....	42
Castel Asylum	....	....	....	1
King Edward Sanatorium	....	....	....	5
Victoria Hospital	....	....	....	18

The more important causes of death compare with those of previous years, as follows :—

	Average 1906-1922.	1922.
Measles	6.3	0
Whooping Cough	5.5	7
Epidemic Enteritis	12.3	0
Diphtheria	4.8	8
Senile Decay	70.0	71
Cancer	40.0	38
Broncho Pneumonia	8.6	7
Pneumonia	19.3	15
Bronchitis	24	37
Heart Disease	64	68
Apoplexy	31.0	29
Tuberculosis, other than		
Phthisis	12.0	5
Phthisis	38.0	43
Influenza	12.0	7

(93 in 1918)

INFANTILE MORTALITY.

The number of children who died under the age of one year was 73, a rate

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of 90 per 1,000. This figure is higher than it should have been, and compares badly with the previous year, 78. The average of the preceding ten years was 95 and of the years 1902-1911, 134.5.

There were no deaths from Epidemic Enteritis, the hotter months being relatively wet and cool, and therefore favourable for infants.

The rates for the 1st, 2nd, 3rd and 4th quarters of the year were as follows : 84, 123, 50 and 104. In the parish of St. Peter Port the rate was 97, in St. Sampson's, 78, in the Vale, 106, and in the other seven parishes, 80.

There are several of the Country Parishes in which no Nursing or Infant Health Associations exist, and in the other parishes these Associations are entirely of a voluntary character. I have repeatedly in the past expressed my great appreciation of their very valuable work, and to them belongs the honour of having laid the foundation of the work in Guernsey. This work, however, should not be of a parochial or entirely voluntary character ; it should apply to the whole Island, and be so organised that the very important and greatly needed Anti-Natal Clinics should be available for every mother who required such help, as well as for every baby, the two divisions being amalgamated. This scheme could best be administered by the Board of Health who would, I am sure, heartily welcome the assistance of the former voluntary workers. I feel quite certain that their services would be as freely given under the suggested new scheme as they have been in the past, indeed, without their kindly interest such a scheme would have but little chance of success.

The great achievement during the year has been the opening of the Lady Ozanne Maternity Home, a thoroughly well-equipped institution which owes its origin to the devoted and continued interest of the lady whose name it rightly bears. It now ought to be only a matter of successful public administration to ensure that at any rate every needy case of difficult childbirth should have the benefit of this Home in the hour of trouble.

By arrangement with the Central Midwives Board the Lady Ozanne Maternity Home with its highly skilled Matron has been approved as a training school for midwives, who will after training be eligible for the examinations and certificate of the C.M.B. We can therefore look forward in the future to the replacement of the old handy woman whose intentions were so good, but whose results were often so disastrous, by the trained candidate with a knowledge of the great responsibility she undertakes.

This transition must be very beneficial both to the parturient woman and her baby, and will no doubt be manifest by a lowering of the present infantile death rate.

Table III.

CAUSES OF DEATH OF CHILDREN UNDER 1 YEAR OF AGE.

	Under 1 week.	Between weeks 1-2. 2-3. 3-4.	Total under 1 month.	Months 1-3. 3-6. 6-9. 9-12.	Ttl.					
<i>General Diseases.</i>										
Ricketts	- .. - .. - .. -	.. - ..	- .. - ..	1 .. - ..	1					
Pupura	- .. - .. - .. -	.. - ..	- .. 1 ..	- .. - ..	1					
<i>Epidemic.</i>										
Whooping Cough ...	- .. - .. - .. -	.. - ..	- .. 2 .. 3 ..	- .. - ..	5					
<i>Alimentary.</i>										
Gastritis	- .. - .. 1 .. -	.. 1 ..	- .. 2 .. - ..	1 .. - ..	3					
Gastro Enteritis ...	- .. - .. - .. -	.. - ..	- .. - .. - ..	1 .. - ..	1					
<i>Septic.</i>										
Septicæmia	- .. - .. - .. -	.. - ..	1 .. - .. - ..	- .. - ..	1					
<i>Respiratory.</i>										
Bronchitis	- .. - .. - .. 1	.. 1 ..	1 .. 1 .. 2 ..	1 .. - ..	5					
Broncho Pneumonia .	1 .. - .. - .. -	.. 1 ..	1 .. 1 .. 1 ..	- .. - ..	3					
Pneumonia	1 .. - .. - .. -	.. 1 ..	- .. - .. 1 .. 1 ..	- .. - ..	2					
<i>Violence.</i>										
Suffocation	1 .. - .. - .. -	.. 1 ..	- .. - .. - .. -	- .. - ..	-					
<i>Infancy.</i>										
Asthenia	1 .. - .. - .. -	.. 1 ..	- .. - .. - .. -	- .. - ..	-					
Congenital Malforma- tion	1 .. - .. - .. -	.. 1 ..	- .. - .. - .. -	- .. - ..	-					
Convulsions	2 .. - .. - .. -	.. 2 ..	5 .. 4 .. - ..	3 .. - ..	12					
Debility at birth	3 .. 1 .. - .. -	.. 4 ..	- .. - .. - .. -	- .. - ..	-					
Injury	1 .. - .. - .. 1	.. 2 ..	- .. - .. - .. -	- .. - ..	-					
Enteritis	- .. - .. - .. 1	.. 1 ..	- .. - .. - .. -	- .. - ..	-					
Marasmus	1 .. - .. - .. -	.. 1 ..	7 .. 1 .. 1 ..	- .. - ..	9					
Premature birth.....	9 .. 4 .. - .. -	.. 13 ..	- .. - .. - .. -	- .. - ..	-					
	21	5	1	3	30	15	12	9	7	43
Total	73									

MARRIAGES.

There were 260 marriages in 1922, equal to a rate of 13.6 per 1,000.

The average of the three past, post-war years, was 328. Of these 165 took place in Church of England, 34 in Nonconformist, and 24 in Roman Catholic Churches; 34 were at the Greffe Office.

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Table IV.

RETURN OF BIRTHS AND DEATHS REGISTERED DURING THE YEAR 1922.

BIRTHS.											
PARISH LETTER:	St. P. Port. <i>A</i>	St. Sampson's <i>B</i>	Vale. <i>C</i>	Castel. <i>D</i>	St. Saviour's. <i>E</i>	St. Pierre-du-Bois. <i>F</i>	Torteval. <i>G</i>	Forest. <i>H</i>	St. Martin's. <i>I</i>	St. Andrew's. <i>K</i>	Total
Males	155	65	61	33	17	12	1	13	41	18	416
Females	153	63	61	30	5	20	4	12	34	12	394
Totals	308	128	122	63	22	32	5	25	75	30	810
DEATHS UNDER 1 YEAR.											
	30	10	13	3	2	6	1	2	3	3	73
STILL BIRTHS.											
	13	6	4	2	1	2	1	1	3	0	33
ILLEGITIMATE BIRTHS.											
	15	6	2	2	1	6	0	0	2	1	35

General Diseases.

DEATHS.

Diabetes	1	..	—	..	—	..	—	..	—	..	1	..	1	..	3
Exfoliative Dematitis ..	1	..	—	..	—	..	—	..	—	..	—	..	—	..	1
Leucocythæmia	—	..	—	..	—	..	1	..	1	..	—	..	—	..	2
Pernicious Anæmia.....	1	..	—	..	—	..	—	..	—	..	—	..	—	..	1
Rheumatism.....	1	..	—	..	—	..	—	..	—	..	—	..	—	..	1
Rheumatoid Arthritis ..	1	..	1	..	—	..	1	..	—	..	—	..	1	..	5
Rheumatic Fever	1	..	—	..	—	..	—	..	—	..	—	..	—	..	1
Ricketts	1	..	1	..	—	..	—	..	—	..	—	..	—	..	2
Purpura	1	..	—	..	—	..	—	..	—	..	—	..	—	..	1

Epidemic.

Encephalitis Lethargica .	—	..	—	..	—	..	1	..	—	..	—	..	—	..	1
Diphtheria	3	..	2	..	2	..	—	..	—	..	—	..	—	..	8
Influenza.....	4	..	2	..	1	..	—	..	—	..	—	..	—	..	7
Whooping Cough	1	..	2	..	1	..	1	..	—	..	2	..	—	..	7

Carried forward..... 16 8 4 3 1 4 1 3 40

Brought forward.....	16	8	4	3	1	4			1	3	40
<i>Alimentary.</i>											
Appendicitis	—	..	—	..	1	..	—	..	—	..	1
Cirrhosis of Liver	1	..	1	..	—	..	—	..	—	..	2
Gastritis	3	..	—	..	1	..	—	..	—	..	6
Gastro Enteritis	1	..	—	..	—	..	—	..	—	..	1
Gastric Ulcer	2	..	1	..	1	..	—	..	—	..	4
Intestinal Obstruction .	1	..	1	..	—	..	—	..	—	..	3
Peritonitis.....	—	..	—	..	—	..	—	..	1	..	1
Strangulated Hernia ...	—	..	—	..	—	..	1	..	—	..	1
<i>Infective.</i>											
Phthisis	15	..	7	..	5	..	1	..	—	..	42
Tuberculosis of kidney..	—	..	1	..	—	..	—	..	1	..	2
Tubercular Peritonitis ..	—	..	1	..	—	..	1	..	—	..	2
„ Meningitis ..	—	..	—	..	1	..	—	..	1	..	2
<i>Intemperance.</i>											
Alcoholism	1	..	—	..	—	..	—	..	—	..	1
Delirium Tremens	1	..	—	..	—	..	—	..	—	..	1
<i>Septic.</i>											
Septicæmia	5	..	2	..	—	..	1	..	3	..	12
Cerebral Abscess	1	..	—	..	—	..	—	..	—	..	1
Oleo Myelitis	1	..	—	..	—	..	—	..	—	..	1
Ulcerative Endocarditis.	1	..	—	..	—	..	—	..	—	..	1
<i>Ill Defined.</i>											
Cardiac Failure	—	..	—	..	1	..	—	..	—	..	1
Natural Causes	2	..	—	..	—	..	—	..	—	..	2
<i>Circulatory.</i>											
Angina Pectoris	1	..	—	..	1	..	2	..	—	..	4
Aneurysm	1	..	—	..	—	..	—	..	—	..	1
Apoplexy	12	..	6	..	4	..	1	..	2	..	29
Atheroma	4	..	1	..	1	..	—	..	—	..	7
Gangrene	1	..	—	..	—	..	—	..	1	..	2
Heart Disease	36	..	8	..	11	..	2	..	3	..	68
Thrombosis.....	—	..	—	..	—	..	1	..	—	..	1
<i>Respiratory.</i>											
Bronchitis	11	..	7	..	6	..	5	..	2	..	37
Broncho Pneumonia....	5	..	1	..	—	..	—	..	1	..	7
Pleuro „	2	..	1	..	—	..	—	..	—	..	3
Pneumonia	8	..	2	..	3	..	1	..	1	..	15
Laryngitis	—	..	—	..	1	..	—	..	1	..	2
Tonsilitis	—	..	—	..	—	..	—	..	1	..	1
Carried forward	132	48	40	17	12	20	1	6	15	13	304

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Brought forward	132	48	40	17	12	20	1	6	15	13	304
<i>Violence.</i>											
Burns	1	..	-	..	-	..	-	..	-	..	1
Crushed	1	..	-	..	-	..	-	..	-	..	1
Drowning	-	..	2	..	-	..	1	..	1	..	5
Fall	4	..	-	..	1	..	-	..	2	..	7
Run Over	-	..	1	..	-	..	-	..	-	..	1
Suffocation	-	..	-	..	1	..	-	..	-	..	1
<i>Tumour.</i>											
Malignant	15	..	4	..	9	..	4	..	2	..	38
<i>Urinary.</i>											
Cystitis	1	..	-	..	-	..	-	..	-	..	2
Nephritis	9	..	2	..	5	..	8	..	-	..	26
<i>Nervous.</i>											
Dementia	2	..	1	..	1	..	-	..	-	..	4
Epilepsy	1	..	1	..	-	..	-	..	1	..	3
Mania	1	..	-	..	-	..	-	..	-	..	1
Meningitis	4	..	-	..	-	..	-	..	-	..	5
Paralysis	2	..	-	..	-	..	-	..	-	..	2
Ascending Paralysis	1	..	-	..	-	..	-	..	-	..	1
General ,,	-	..	-	..	1	..	-	..	-	..	1
Landry's ,,	-	..	-	..	-	..	-	..	1	..	2
Spastic ,,	-	..	-	..	1	..	-	..	-	..	2
Paraplegia	-	..	-	..	1	..	-	..	-	..	1
Paralysis Agitans	1	..	-	..	-	..	-	..	-	..	1
Tabes Dorsalis	1	..	-	..	-	..	-	..	-	..	1
<i>Infancy.</i>											
Asthenia	-	..	-	..	-	..	1	..	-	..	1
Congenital malformation	-	..	-	..	-	..	-	..	-	..	1
Convulsions	8	..	1	..	4	..	-	..	1	..	15
Debility at Birth	1	..	1	..	-	..	1	..	-	..	4
Injury ,, ,,	-	..	-	..	1	..	-	..	1	..	2
Enteritis	1	..	-	..	-	..	-	..	-	..	1
Marasmus	3	..	2	..	3	..	-	..	1	..	10
Premature Birth	7	..	1	..	2	..	1	..	-	..	13
<i>Old Age.</i>											
Senile Decay	31	..	9	..	6	..	5	..	3	..	71
	227	73	76	38	18	31	6	11	24	24	528

Table V.

CAUSES OF, AND AGES AT DEATH, OF DEATHS REGISTERED
DURING THE YEAR 1922.

CAUSE OF DEATH.	Under 1 yr.	Between					Over 65.	Total.
		1-2	2-5.	5-15.	15-25.	25 to 65.		
<i>General Diseases.</i>								
Diabetes	—	..	—	..	—	..	1 .. 2 ..	3
Exfoliative Dermatitis ..	—	..	—	..	—	..	— .. 1 ..	1
Leucocythæmia	—	..	—	..	—	..	— .. 2 ..	2
Pernicious Anæmia	—	..	—	..	—	..	1 .. — ..	1
Rheumatism	—	..	—	..	—	..	— .. 1 ..	1
Rheumatoid Arthritis ...	—	..	—	..	—	..	2 .. 3 ..	5
Rheumatic Fever.....	—	..	—	..	1 ..	—	— .. — ..	1
Ricketts	1 ..	1 ..	—	..	—	..	— .. — ..	2
Purpura.....	1 ..	—	..	—	..	—	— .. — ..	1
<i>Epidemic.</i>								
Encephalitis Lethargica .	—	..	—	..	1 ..	—	— .. — ..	1
Diphtheria	—	..	1 ..	2 ..	5 ..	—	— .. — ..	8
Influenza	—	..	—	..	—	1 ..	3 .. 3 ..	7
Whooping Cough	5 ..	1 ..	—	..	1 ..	—	— .. — ..	7
<i>Alimentary.</i>								
Appendicitis	—	..	—	..	1 ..	—	— .. — ..	1
Cirrhosis of liver	—	..	—	..	—	1 ..	1 ..	2
Gastritis	4 ..	—	..	—	..	—	1 .. 1 ..	6
Gastro Enteritis	1 ..	—	..	—	..	—	— .. — ..	1
Gastric Ulcer	—	..	—	..	1 ..	—	3 .. — ..	4
Intestinal Obstruction ..	—	..	—	1 ..	—	—	— .. 2 ..	3
Peritonitis	—	..	—	..	—	1 ..	— .. — ..	1
Strangulated Hernia ...	—	..	—	..	—	1 ..	— .. — ..	1
<i>Infective.</i>								
Phthisis	—	..	—	..	1 ..	21 ..	21 .. —	43
Tuberculosis of kidney ..	—	..	—	..	—	—	1 .. — ..	1
Tubercular Peritonitis ..	—	..	—	..	1 ..	—	1 .. — ..	2
„ Meningitis	—	..	1 ..	—	1 ..	—	— .. — ..	2
Carried forward.....	12	4	3	13	22	37	16	107

	Under 1 year.	1-2	2-5	5-15	15-25	25-65	Over 65	Total.
Brought forward	12	4	3	13	22	37	16	107
<i>Intemperance.</i>								
Alcoholism	—	..	—	..	—	..	1	1
Delirium Tremens	—	..	—	..	—	..	1	1
<i>Septic.</i>								
Septicæmia	1	..	—	..	1	..	6	12
Cerebral Abscess	—	..	—	..	—	..	1	1
Oleo Myelitis	—	..	—	..	—	..	1	1
Ulcerative Endocarditis	—	..	—	..	—	..	1	1
<i>Ill Defined.</i>								
Cardiac Failure	—	..	—	..	—	..	1	1
Natural Causes	—	..	—	..	—	..	2	2
<i>Circulatory.</i>								
Angina Pectoris	—	..	—	..	—	..	3	4
Aneurysm	—	..	—	..	—	..	1	1
Apoplexy	—	..	—	..	—	..	9	29
Atheroma	—	..	—	..	—	..	7	7
Gangrene	—	..	—	..	—	..	1	2
Heart Disease	—	..	1	..	2	..	3	23
Thrombosis	—	..	—	..	—	..	1	1
<i>Respiratory.</i>								
Bronchitis	6	..	—	..	1	..	1	7
Broncho Pneumonia	4	..	2	..	—	..	—	1
Pleuro „	—	..	—	..	—	..	1	2
Pneumonia	3	..	—	..	1	..	2	6
Laryngitis	—	..	—	..	1	..	—	1
Tonsilitis	—	..	—	..	1	..	—	1
<i>Violence.</i>								
Burns	—	..	—	..	—	..	1	1
Crushed	—	..	—	..	—	..	1	1
Drowning	—	..	—	..	1	..	3	5
Fall	—	..	—	..	—	..	4	3
Run Over	—	..	—	..	—	..	1	1
Suffocation	1	..	—	..	—	..	—	1
Carried forward	27	7	7	20	30	110	119	320

	Under 1 year.	1-2	2-5	5-15	15-25	25-65	Over 65	Total.
Brought forward	27	7	7	20	30	110	119	320
<i>Tumour.</i>								
Malignant	—	..	—	..	—	..	1 .. 22 .. 15 ..	38
<i>Urinary.</i>								
Cystitis	—	..	—	..	—	..	1 .. 1 ..	2
Nephritis	—	..	—	..	—	..	12 .. 14 ..	26
<i>Nervous.</i>								
Dementia	—	..	—	..	—	..	1 .. 3 ..	4
Epilepsy	—	..	—	..	1 ..	—	.. 1 ..	3
Mania	—	..	—	..	—	.. 1 ..	—	.. 1
Meningitis	—	.. 1 ..	1 ..	1 ..	2 ..	—	.. —	.. 5
Paralysis	—	..	—	..	—	.. 1 ..	1 ..	2
Ascending Paralysis	—	..	—	..	—	.. 1 ..	—	.. 1
General „	—	..	—	..	—	.. 1 ..	—	.. 1
Landrys „	—	..	—	..	—	.. 2 ..	—	.. 2
Spastic „	—	..	—	..	—	.. 1 ..	1 ..	2
Paraplegia	—	..	—	..	—	.. 1 ..	—	.. 1
Paralysis Agitans	—	..	—	..	—	.. —	.. 1 ..	1
Tabes Dorsalis	—	..	—	..	—	.. 1 ..	—	.. 1
<i>Infancy.</i>								
Asthenia	1 ..	—	..	—	..	—	.. —	.. 1
Congenital Malformation	1 ..	—	..	—	..	—	.. —	.. 1
Convulsions	14 ..	1 ..	—	..	—	..	—	.. 15
Debility at Birth	4 ..	—	..	—	..	—	.. —	.. 4
Injury „	2 ..	—	..	—	..	—	.. —	.. 2
Enteritis	1 ..	—	..	—	..	—	.. —	.. 1
Marasmus	10 ..	—	..	—	..	—	.. —	.. 10
Premature Birth	13 ..	—	..	—	..	—	.. —	.. 13
<i>Old Age.</i>								
Senile Decay	—	..	—	..	—	..	—	.. 71 .. 71
<hr/>								
	73	9	8	22	36	154	226	528
<hr/>								

DIPHTHERIA IN 1922.

	Jan.	Feb.	Mar.	Apl.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
St. Peter-Port ..	17	11	5	3	4	10	1	2	3	1	1	1	59
St. Sampson's ...	16	6	6	4	4	2	2	1	1	0	1	0	43
Vale	15	9	3	1	3	2	0	4	5	1	0	0	43
Castel	4	1	4	1	0	1	1	1	0	1	2	1	17
St. Saviour's.....	1	1	1	—	—	—	—	—	—	—	—	—	3
St. Pierre-du-Bois	—	1	—	—	—	—	—	—	—	—	—	—	1
Torteval	—	—	—	—	—	—	—	—	—	—	—	—	0
Forest	1	—	—	—	—	—	—	—	—	—	—	—	1
St. Martin's	3	1	1	—	—	2	—	—	—	—	—	—	7
St. Andrew's	1	—	1	—	1	—	—	—	—	—	1	1	5
	58	30	21	9	12	17	4	8	9	3	5	3	179

Cases classified according to age.

Under 1 year.	1-5	5-10	10-15	15-20	20-25	Over 25 years.	Total.
2	19	85	45	11	6	11	179

THE KING EDWARD SANATORIUM.

One hundred and eighty cases were treated here during 1922, 149 of which were admitted in the first six months of the year. As was the case in the later months of 1921, the pressure upon the accommodation available was great; the largest number of patients on any day was 50, and the daily average 18.0. As mentioned in the last report the Sanatorium had never been completed as originally intended, and the lack of accommodation was again so evident during the recent epidemic of Diphtheria, that cases had to be isolated in special wards at the Town Hospital as in the previous year, and two cases of Enteric Fever at the Castel Hospital.

The Board therefore approached the States with a view to the erection of two wooden wards which it was thought could be quickly erected at a moderate cost, and provide accommodation for some thirty patients. The States sanctioned this proposal, but there was considerable delay in their erection, as the provision of workmen's dwellings which was so badly required, absorbed all available labour. They were not therefore ready by the fall of the year as was anticipated, but this fortunately did not matter as they would not have been occupied even if they had been completed.

The well which provides the Sanatorium with water having in dry years yielded an insufficient supply, it was deepened during the year, and as a result it may be assumed that no such difficulty will occur in the future.

NOTIFIABLE INFECTIOUS DISEASES.

There were no cases of either Smallpox, Cerebro Spinal Meningitis, or Scarlet Fever notified in 1922.

DIPHThERIA.

As seemed to be the universal experience, Diphtheria was very prevalent in the latter part of 1921, and the earlier months of 1922. One hundred and seventy-nine cases were reported, of which 171 were treated at the Sanatorium, with four deaths, a percentage of 2.3 ; and 8 at home, also with 4 deaths, a percentage of 50.0.

It is one of the peculiarities of our Local administration that such a high percentage of cases of all notifiable infectious diseases are treated in the Isolation Hospital, but those familiar with our local conditions will understand why this is necessary, and with the results of this treatment during the years since the institution was opened such a proceeding justifies itself. As is usually the case many of the cases were related to each other. Torteval was the only parish in which there were no cases in 1922.

It was not considered necessary to close any schools during the year as a result of the epidemic.

ENTERIC FEVER.

Two cases were notified in January, both the sequel of an obscure and un-notified case in St. Sampson's. These cases appeared to be sporadic ones. The drainage of the house, which was in an unsatisfactory condition, was promptly put right through the intervention of the Constables of the parish. As there was no room for them in the Sanatorium, the Directors of the Country Hospital kindly isolated them at the expense of the Board of Health.

ENCEPHALITIS LETHERGICA.

One case of Sleeping Sickness—a fatal one—was notified, the victim being a visitor of 48 years of age, who fell ill a day or two after his arrival here and died after a short illness.

TUBERCULOSIS.

There were 48 deaths from this cause, 43 being due to Phthisis and 5 to other forms of tuberculosis, equal to rates of 1.1 and 0.13 per 1,000 respectively. Of the deaths from Phthisis, 5 were those of ex-service men, a sad ending for gallant men who survived the horrors of war to die subsequently of the results of them.

There were 21 male deaths at an average age of 31 years, and 22 females at an average age of 26 years. Of the nine patients admitted to the Sanatorium four are likely to show a permanent improvement, three have since died, and two only can be said to be in *statuo quo*.

I have often referred to the great difficulty experienced in getting patients to seek Sanatorium treatment in an early and curable stage, a difficulty which is really almost universal. When dealing with this question, the Medical Superintendent of the Metropolitan Asylums Board, which is the largest

authority and with the best equipped hospitals in the world for the treatment of this and other infectious diseases, after with a natural pride stating its great resources, has to regretfully admit that the only thing which is wanting is "the patient in the early stage of the disease." Here when a patient is manifestly very ill and there is but little, if any, hope of his recovery, even his relations realising that, removal to a hospital is often desired not only by the patient but by his friends.

In such cases removal is very desirable in the interests of everyone concerned. Such chronic cases are a potent source of infection which housing difficulties greatly increase, tuberculosis being so largely a "house" disease. The removal of the patient with the consequent disinfection of the premises and the absence of a chronic, wearing and infectious illness from the household is of very great benefit to the health of the other members of the family or house.

Such patients are entitled to frequent visits from their relations and this fact, without considering others, is sufficient to exclude them from Isolation Hospitals. In Guernsey both Town and Country hospitals have accommodation for such patients. It seems to me that what is wanted here is an improvement in and extension of such accommodation, and the payment by the States for their maintenance as in the case of other infectious diseases, so that the Poor Law status will be eliminated.

WATER SUPPLY.

"During the early summer of 1918, one of the periodical crises to which we have unfortunately become accustomed with regard to our water supply, again occurred as a result of the long accumulating deficiency in the rainfall." (Report for 1918.)

This sentence applies equally well to the year 1922, and it will, I fear, also apply to future years, although it is to be hoped with not quite the same force.

The States' Water Board were greatly handicapped by the circumstances under which they took over the undertaking of the old Company, who, under very difficult conditions, had done their utmost to fulfil their obligations to their customers. For a long time it had been evident that the existing wells of the Company, inadequate as a source of supply many years ago, were becoming less and less efficient as the long-continued and heavy drain upon them exhausted the resources of the watershed. It had also been evident that increased sources of supply must be from streams, preferably that of the King's Mills, but with a most important proviso, which I believe was universally recognised, and that was the provision of a storage reservoir.

The expert consulted by the States recommended the construction of one of very large size to hold no less than 60,000,000 gallons. The States' Surveyor suggested one of more moderate but still of considerable dimensions, with a capacity of 35,000,000 gallons. This reservoir would not only serve for the obvious purpose of storing up water when the supply was abundant for use

when it was deficient, but would also have the effect of purifying the water it contained to a great extent. The water from our streams would be one which would derive the maximum of benefit from such storage, the working of the filter beds would have been greatly facilitated and the community would have had the very important safeguard of the reservoir against the occurrence of water-borne disease.

The States' Water Board has decided, at any rate for the present, against a reservoir, but such a decision must have been due not only to financial considerations, but to questions of the time involved in its construction, and the absolute necessity of putting water into otherwise empty mains. It was truly a case of "needs must when the devil drives." Fortunately the comparatively recently introduced but very effective treatment of water by Chlorine as a means of sterilisation saved the situation. The efficacy of this process was abundantly proved during the Great War. Without it, or without a storage reservoir, any one who advocated the use of stream water in Guernsey for domestic purposes would be taking such a risk of disaster to the community that no man with knowledge would take such a responsibility.

The situation in March when the States Analyst and myself were first called in consultation with the Water Board was so critical that we were informed that if the water from the St. Saviour's stream could not be used, the mains would be practically empty and could not be supplied from the Board's wells. Two Candy mechanical filters had been erected at the pumping station, and it was decided that providing an automatic liquid chlorinating apparatus of the latest type were installed there, the water might be safely used.

This source of supply has since then been constantly used during the year. Attempts were made during the progress of the permanent works at Kings Mills to use the water from this source, but they were not entirely successful and therefore were not insisted in.

At times there were complaints, loud and bitter, about over-chlorination of the water, and it must be admitted that its taste was occasionally really horrible. This was no doubt due to new conditions and the presence of vegetable growths in the mains which were acted upon by the excess of Chlorine in the water. Fortunately these complaints did not last long.

I think it is my duty to state quite definitely the position with regard to our water supply as I see it. I hold that with the exception of water supplied from the existing wells of the Board or other similar sources of supply, stream or surface waters in the absence of an adequate storage reservoir should be first filtered and then chlorinated. If the chlorination be not properly carried out, the public are not protected as they should be from water-borne disease. Filtration is of less importance, and it must be borne in mind that sand filters require very careful management. I do not regard the permanent chlorination of the water as a regrettable necessity. On the contrary, I consider it an entirely desirable measure.

HOUSING ACCOMMODATION.

The Committee concerned with the provision of Homes for Workers have done excellent work with the funds at their disposal, and have provided wooden huts for 24 families besides securing a grant from the States for the erection of permanent houses for another 20 families.

Such schemes, however, fall far short of our requirements, and one can only hope that the time will soon come when the fall in the prices of building materials will be such that small houses will again be built by private enterprise. Many Club and Benefit Societies have large accumulated funds and it seems to me that they might well invest some portion of their funds in providing houses for their members to live in. It seems as if Cornet Street, parts of which have for so long been a reproach to us, will very soon be dealt with in a satisfactory manner by the States.

PRIMARY SCHOOLS.

The health of the children has during the year been, on the whole, good, and the routine treatment of eye defects and enlarged tonsils and adenoids has been well maintained. In the last few years there has been a great improvement in the cleanliness of the children, and the schemes of the Board of Health for the free treatment of such conditions have been even more successful than could have been anticipated when they were first started. They would not have been, however, without the hearty co-operation and keen interest of the school teachers concerned.

SANITARY INSPECTION AND DISINFECTION.

During the year 350 houses were visited and revisited, and in every case where defects were found they were remedied. In some cases it was necessary to take action through the Constables, but fortunately every year the number appears to be smaller than the preceding year, a satisfactory state of affairs.

Two hundred and forty-two houses and 7,877 articles of clothing, bedding, etc., were disinfected. No claim for any damaged or lost articles has been made for several years, and as 1922 was almost as arduous a year for the staff engaged in this work as the previous one, their excellent work deserves recognition. I am not concerned directly in this work, so I do not mind saying that I believe it is carried out here in a manner that would be a credit to any place, no matter where it may be.

ANALYSIS OF FOODS.

Twenty-four samples of milk and butter were taken in 1922, and with one exception all were found to be satisfactory. Owing to an unusual legal point no prosecution of this case could be undertaken.

STATES' LABORATORY.

Five hundred and seventy-two specimens of various kinds were examined during the year. Some of them were for the Military Authorities and the Pensions Board.

THALASSOL.

Twelve thousand six hundred and fifty-five gallons of this disinfectant were manufactured during 1922. It is largely used by all classes as well as by the hospitals, markets, abattoirs and by the Military Authorities here and in Alderney. In the latter case the States receive payment for the supply.

DRAINAGE.

Good progress has been made with the Vale drainage scheme in spite of the great difficulties encountered, but no further work has been carried out during 1922. It seems extraordinary that no scheme of the kind has been adopted for St. Martin's. This populous parish is in urgent need of a system of main drainage, which could be very easily carried out, the levels being so favourable. Other districts that should also be systematically drained are parts of the Castel and Cobo parishes, and the bungalows area of L'Ancrese Common.

At the beginning of the year there was a conference with a representative of the National Society for the Prevention of Venereal diseases, and the Island Authorities, represented by the Bailiff, the Acting President of the Board of Health, the Government Secretary and myself. As a result it was decided that no action should be taken either as regards the State free treatment of these diseases or any campaign of publicity. In previous reports I have made allusions to this important but controversial matter, and while greatly regretting the decisions arrived at in view of the devastating effects of them so well known to medical men, I feel sure that at present such a decision is in accordance with general public opinion here.

In my report for 1912 I referred to two English Acts, the Shop Hours Act of 1892, and the Seats for Shop Assistants Act of 1899. It does not appear as if the former were now needed here as, fortunately, much shorter hours are worked than formerly; but the provision of the latter Act—not less than one seat to every three female assistants employed in shops or similar places, certainly is. Most of our tradesmen seem considerate in this matter, but as great distress and injury to health results from prolonged standing where women are concerned, I should like to see this Act adopted here. Although the matter is not so insistent in the case of men, I see no reason why they should not also have the benefit of this Act and be included in its scope.

SCHOOL CLOSURE.

In my last as well as in previous reports, I pointed out that the Board of Health had not the power as such a body would have in England, to order the closure of a school on account of the occurrence of infectious diseases amongst the children attending it, and that in Guernsey the power had been vested in the Education Council.

This power had been taken for granted, but a study of the Education Law revealed the somewhat startling fact that no Authority could order the closure of schools.

The Board of Health therefore approached the States with a view to having this power granted them, on the grounds that they were answerable not only for the health of school children, but for the health of the whole community, that they were unable to effectually control infectious diseases without it, and that they possessed special knowledge of the incidence of these diseases which no other Authority could have. The States, however, decided that this power should be entrusted to the Education Council, and not to the Board of Health. One must hope that this decision will not have any unfavourable influence upon future procedure in the matter, although in theory it seems as if it might have.

Complaints are often made that our system of Public Health is much behind that of England, and after my last report was issued, a well-informed but sympathetic critic in the press stated that it was "only moderately satisfactory." However, it is obviously impossible to legislate in advance of public opinion in this as in other matters.

Our Public Health system now only in its 25th year is being steadily if slowly built up. To be progressive and successful it must rely upon an understanding of its necessity and the co-operation of the public generally.

Many new measures are necessary, but anyone who can look back upon the past twenty-five years will probably be struck not so much by this thought, as by the fact that in our naturally conservative community so much has been accomplished during this period as a result of the education of public opinion.

HY. DRAPER-BISHOP,

States M.O.H.

August 30th, 1923.

